PTO/SB/22 (12-04)
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection  PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)  FY 2005  (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			Docket Number (Optional) 112427.132-US1			
For ADJUSTMEN	T DEVICE AND BUILDING EL	EMENT				
Art Unit 3637			Examiner	W. S. Yip		
This is a request unde dentified application.	er the provisions of 37 CFR 1.	136(a) to extend the	period for filing a rep	ly in the above		
The requested extens	sion and fee are as follows (ch	eck time period desir	ed and enter the app	propriate fee below):		
X One mor	oth (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity Fee \$60	\$ 60.00		
Two mon	ths (37 CFR 1.17(a)(2))	\$450	\$225	\$		
<del>     </del>	onths (37 CFR 1.17(a)(3))	\$1020	\$510	\$		
=	nths (37 CFR 1.17(a)(4))	\$1590	\$795	\$		
<u></u>	ths (37 CFR 1.17(a)(5))	\$2160	\$1080	\$		
X Applicant clain	ns small entity status. See 37	OED 4 07				
A check in the	amount of the fee is enclosed	l.				
Payment by cr	edit card. Form PTO-2038 is	attached.				
	as already been authorized to		pplication to a Depos	sit Account.		
	-	-				
Deposit Accou	hereby authorized to charge a nt Number 08-0219	•	sed a duplicate copy	-		
I am the	applicant/inventor.					
	assignee of record of the enti	ire interest. See 37 (	OFR 3.71.			
	Statement under 37 CFR					
X	attorney or agent of record.	Registration Number	33,458	· ·		
	attorney or agent under 37 C	FR 1.34.				
	Registration pumber if acting u	under 37 CFR 1.34		<u> </u>		
	1 Victor Laute		July 1	0.2006		
	V V MOINI LIZ III IAIVV			0, 2000		
	Signature		L	ate		
	Victor F. Souto		(212) 2	Pate 230-8800		
	· ·		(212) 2	ate		
NOTE: Signatures of all t	Victor F. Souto Typed or printed name the inventors or assignees of record of the	e entire interest or their repres	(212) 2 Telephor	Pate 230-8800 ne Number		
	Victor F. Souto Typed or printed name the inventors or assignees of record of the	·	(212) 2 Telephor	Pate 230-8800 ne Number		

07/12/2006 HDESTA1 00000103 080219 10727987

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Express Mail Label No. EV 842149923 US Dated: July 10, 2006

PTO/SB/17 (01-06)

Linder the Paner	work Reduction Act of 1	995, no person are required to		nt and Tradema	ark Office; U.S. DEF	PARTMENT	OF COMMERCI
X7	respond to a collection of information unless it displays a valid OMB control number  Complete if Known						
FEE TRANSMITTAL  For FY 2006			Application Number 10/727987-C			nf. #7249	
					December 5, 2003		
					Dickory RUDDUCK		
					W. S. Yip		
X Applicant claims small entity status. See 37 CFR 1.27			Art Unit 3		3637		
TOTAL AMOUNT OF PAYMENT (\$) 60.00			Attorney Docke	Attorney Docket No. 112427.132-US1			
METHOD OF P	AYMENT (check a	ıll that apply)					
Check	Credit Card	Money Order No	ne Other	(please identi	fy):		
X Deposit Acco	unt Deposit Account No	umber: 08-0219 Deposit Ad	count Name: W	ilmer Cutle	r Pickering Ha	le and Do	orr LLP
For the ab	ove-identified depos	sit account, the Director i	s hereby authoriz	ed to: (checl	k all that apply)		-
	rge fee(s) indicated	•	<u> </u>	•	icated below, ex	cept for t	he filing fee
	• ,,	e(s) or underpayment of		t any overpa		•	_
	s) under 37 CFR 1.		X Credi	t arry overpa	lyments		
FEE CALCULA	TION (All the fee	s below are due upo	n filing or may	be subject	ct to a surcha	rge.)	
1. BASIC FILING,	SEARCH, AND EX						
	FIL	ING FEES SE Small Entity	ARCH FEES Small Entity		ATION FEES Small Entity		
Application Typ	<u>e Fee (\$)</u>	Fee (\$) Fee (\$		Fee (\$)	Fee (\$)	Fees	Paid (\$)
Utility	300	150 500	250	200	100		
Design	200	100 100	50	130	65		
Plant	200	100 300	150	160	80		
Reissue	300	150 500	250	600	300		
Provisional	200	100 0	0	0	0		
2. EXCESS CLAIF	M FEES					E (A)	Small Entity
Fee Description	0.4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	`				Fee (\$)	Fee (\$)
i	0 (including Reissu					50 200	25 100
Multiple dependen	claim over 3 (included at claims	uilig Keissues)				360	180
Total Claims	Extra Claims	Fee (\$) Fee	Paid (\$)	Mii	Itiple Depende		
Total Claims	= X	= 100	ι αια (ψ)			ee Paid (	
HP = highest numer	of total claims paid for, if	greater than 20.					<del>-</del>
Indep. Claims	Extra Claims	Fee (\$) Fee	Paid (\$)				
	= x	=					
<b>.</b>	of independent claims pa	id for, if greater than 3.					
3. APPLICATION	SIZE FEE	eed 100 sheets of paper	(aualudina alaat	naminallu filo	d saguanaa on	acmmutar	
		ne application size fee d					0
		U.S.C. 41(a)(1)(G) and			,,		
Total Sheets	Extra Sheets	Number of each	additional 50 or fra	ction thereof	Fee (\$)	<u>Fee</u>	Paid (\$)
<u></u>	100 =		(round up to a wh	ole number) x	· =	<u> </u>	
4. OTHER FEE(S)						<u>Fees</u>	<u>Paid (\$)</u>
		fee (no small entity disc					
Other (e.g., late	filing surcharge):	2251 Extension for re	sponse within f	rst month		6	0.00
SUBMITTED BY		XIII					
Signature		FSOUTS	Registration No. (Attorney/Agent)	33,458	Telephone	(212) 23	0-8800
Name (Print/Type)	ictor F. Souto	4			Date	July 10	, 2006

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